Check if this ar amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Write	e the name that is on	John	Toni
		government-issued ire identification (for	First name	First name
	exar	nple, your driver's	C.	K.
	licer	ise or passport).	Middle name	Middle name
		g your picture tification to your	Yasch	Yasch
		meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.		Toni K. Kemnitz
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-3375	xxx-xx-0398

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	13407 Sherry Avenue	If Debtor 2 lives at a different address:
		Cleveland, OH 44135  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		County County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1	John C. Yasch
Debtor 2	Toni K. Yasch

Case number (if known)

Par	Tell the Court About	Your Bank	ruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapt	er 7						
		☐ Chapt	er 11						
		☐ Chapt	er 12						
		■ Chapt	er 13						
8.	How you will pay the fee	abo ord	ut how yo er. If your	the entire fee when I file my petition. Please check with the clerk's office in your local court for my you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check our attorney is submitting your payment on your behalf, your attorney may pay with a credit card or ed address.					
						on, sign and attach the Application for Individuals to Pay			
			•	ee in Installments (O at my fee be waive	,	n only if you are filing for Chapter 7. By law, a judge may,			
		but app	is not req lies to yo	uired to, waive your ur family size and yo	r fee, and may do so only if yo ou are unable to pay the fee i	our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
					· ·	, , ,			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.	District		NA/II	Occupant of			
			District District		When When	Case number Case number			
			District		When	Case number Case number			
			District		When	Oase number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor		\A/la a.a	Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	■ No.	Go to l	ine 12.					
	residence?	☐ Yes.	Has yo	our landlord obtaine	d an eviction judgment agains	st you and do you want to stay in your residence?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with this			

	otor 1 John C. Yasch otor 2 Toni K. Yasch			Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Owi	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, State & ZIP Code		
	separate sheet and attach it to this petition.		Chec	the appropriate box to describe your business:		
				Health Care Business (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C. § 101(53A))		
				Commodity Broker (as defined in 11 U.S.C. § 101(6))		
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can se deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am	ot filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	ing under Chapter 11, but I am NOT a small business debtor according to the	e definition in the Bankruptcy	
		☐ Yes.	I am	ing under Chapter 11 and I am a small business debtor according to the def	inition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifies hazard to	☐ Yes.	What is	ne hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed,		Where i	the property?		

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Debtor 1 John C. Yasch Debtor 2 Toni K. Yasch

Case number (if known)

#### Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 2 Toni K. Yasch			Case numbe	(if known)			
Part	6: Answer These Questi	ions for R	Reporting Purposes					
16.	What kind of debts do you have?	16a.	16a. <b>Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		business debts? Business debts are debts avestment or through the operation of the bus				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not consumer debts or busines	ss debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		☐ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99	Э	<u></u> 5001-10,000	<u></u> 50,001-100,000			
		☐ 100-1		□ 10,001-25,000	☐ More than100,000			
		200-9	999					
19.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million	☐ More than \$50 billion			
			, • • · · · · · · · · · · · · · · · · ·					
20.	How much do you estimate your liabilities	□ \$0 - \$		\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have e	xamined this petition, and I d	declare under penalty of perjury that the inforr	nation provided is true and correct.			
				er 7, I am aware that I may proceed, if eligible, e relief available under each chapter, and I ch				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I reques	t relief in accordance with th	e chapter of title 11, United States Code, spec	cified in this petition.			
		bankrup and 357	tcy case can result in fines u 1.	ent, concealing property, or obtaining money on the second property of \$250,000, or imprisonment for up to 20 years.	rears, or both. 18 U.S.C. §§ 152, 1341, 1519			
			n C. Yasch C. Yasch		h			
		JUILI U						

Signature of Debtor 1

Signature of Debtor 2

Debtor 1	John C. Yasch	
Debtor 2	Toni K. Yasch	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William J. Balena	Date	November 13, 2017	
Signature of Attorney for Debtor		MM / DD / YYYY	
William J. Balena 0019641			
Printed name			
Balena Law Firm, LLC			
Firm name			
30400 Detroit Road			
Suite 106			
Westlake, OH 44145			
Number, Street, City, State & ZIP Code			
Contact phone	Email address		
0019641			
Bar number & State		<del></del>	

Fill in this in	nformation to identify your	case:			
Debtor 1	John C. Yasch	Middle News	L. W.		
Debtor 2	First Name  Toni K. Yasch	Middle Name	Last Name		
(Spouse if, filing)		Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case numbe	er				
(if known)				_	c if this is an ded filing
			-		
Official	Form 106Sum				
Summar	y of Your Assets	and Liabilities an	d Certain Statistical Information		12/15
nformation. our origina	Fill out all of your schedul	es first; then complete th	are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page.		
				Your a	ssets of what you own
1. Schedi 1a. Cop	ule A/B: Property (Official For some state, fo	orm 106A/B) rom Schedule A/B		\$	54,100.00
1b. Cop	by line 62, Total personal pro	perty, from Schedule A/B		\$	22,328.46
1c. Cop	by line 63, Total of all propert	y on Schedule A/B		\$	76,428.46
Part 2: Su	ımmarize Your Liabilities				
					abilities t you owe
	ule D: Creditors Who Have Co		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	108,321.00
	ule E/F: Creditors Who Have by the total claims from Part		I Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	9,080.09
3b. Cop	by the total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	165,636.00
			Your total liabilities	\$	283,037.09
Part 3: Su	ımmarize Your Income and	l Expenses			
	ule I: Your Income (Official Fo	-			
			<i>I</i>	\$	6,094.26
	ule J: Your Expenses (Official our monthly expenses from li			\$	4,908.00
Part 4: Ar	nswer These Questions for	Administrative and Stati	stical Records		
-	u filing for bankruptcy undo  o. You have nothing to report		heck this box and submit this form to the court with yo	ur other scl	hedules.
■ Ye 7. <b>What k</b>	es ind of debt do you have?				
	our dobte are primarily can	eumar dabte. Canaumar	Vahte are those "incurred by an individual primarily for	a naraanal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,754.66

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	9,080.09
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,080.09

Fill in this info						
	rmation to identify	your case and th	is filing	j:		
Debtor 1	John C. Yas					
<b>-</b>	First Name		Name	Last Name		
Debtor 2 (Spouse, if filing)	Toni K. Yaso		Name	Last Name		
(Spouse, il lilling)	i iist ivaille	ivildule	i Naille	Lastivaine		
United States B	Bankruptcy Court for	the: NORTHER	N DIST	RICT OF OHIO		
Case number						☐ Check if this is ar amended filing
Schedu	orm 106A/B	operty	an accet	only once. If an asset fits in more than or	no potogony liet the good i	12/15
	ore space is needed, a			married people are filing together, both ar nis form. On the top of any additional page		
Part 1: Describe	e Each Residence, Bu	uilding, Land, or Otl	her Real	Estate You Own or Have an Interest In		
Do you own or	r have any legal or eg	uitable interest in a	nv resid	ence, building, land, or similar property?		
_			,	,,		
☐ No. Go to Pa	art 2.					
Yes. Where	e is the property?					
			What	is the property? Check all that apply		
13407 Sh	nerry Avenue		What	is the property? Check all that apply Single-family home		claims or exemptions. Put
13407 Sh	nerry Avenue s, if available, or other desc	cription	What ■		the amount of any secur	red claims on Schedule D:
13407 Sh		cription	■	Single-family home	the amount of any secur	
13407 Sh		cription	<b>■</b>	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur	red claims on Schedule D:
13407 Sh Street address	s, if available, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any securic Creditors Who Have Cla	red claims on Schedule D: nims Secured by Property.  Current value of the
13407 Sh Street address	s, if available, or other desi	44135-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any securic Creditors Who Have Classifications  Current value of the entire property?	red claims on Schedule D: nims Secured by Property.  Current value of the portion you own?
13407 Sh Street address	s, if available, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property	the amount of any securic Creditors Who Have Cla	red claims on Schedule D: nims Secured by Property.  Current value of the portion you own?
13407 Sh Street address	s, if available, or other desi	44135-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	the amount of any securic Creditors Who Have Classifications Current value of the entire property? \$54,100.00  Describe the nature of	Current value of the portion you own?  \$54,100.00  your ownership interest
13407 Sh Street address	s, if available, or other desi	44135-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$54,100.00  Describe the nature of (such as fee simple, te	Current value of the portion you own?  \$54,100.00  your ownership interest enancy by the entireties, or
13407 Sh Street address	s, if available, or other desi	44135-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one	the amount of any securic Creditors Who Have Classifications Current value of the entire property? \$54,100.00  Describe the nature of	Current value of the portion you own?  \$54,100.00  your ownership interest enancy by the entireties, or
Street address  Clevelan  City	s, if available, or other desc d OH State	44135-0000	■	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$54,100.00  Describe the nature of (such as fee simple, te a life estate), if known.	Current value of the portion you own?  \$54,100.00  your ownership interest enancy by the entireties, or
Clevelan City  Cuyahog	s, if available, or other desc d OH State	44135-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$54,100.00  Describe the nature of (such as fee simple, te a life estate), if known.	Current value of the portion you own?  \$54,100.00  your ownership interest enancy by the entireties, or
Street address  Clevelan  City	s, if available, or other desc d OH State	44135-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any securic Creditors Who Have Classifications Current value of the entire property? \$54,100.00  Describe the nature of (such as fee simple, te a life estate), if known.  Joint tenant  Check if this is co	Current value of the portion you own?  \$54,100.00  your ownership interest enancy by the entireties, or
Clevelan City  Cuyahog	s, if available, or other desc d OH State	44135-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$54,100.00  Describe the nature of (such as fee simple, te a life estate), if known.  Joint tenant  Check if this is co (see instructions)	Current value of the portion you own?  \$54,100.00  your ownership interest nancy by the entireties, or

Official Form 106A/B Schedule A/B: Property page 1

.2	If you own or hav	e more	than one, list h	ere:				
1.2	Marina Village Condominum 10335 Gulf Beach Hwy Street address, if available, or other description				is the property? Check all that apply			
					Single-family home	Do not deduct secured clause the amount of any secure		
					Duplex or multi-unit building	Creditors Who Have Clair		
					Condominium or cooperative			
					Manufactured or mobile home	Current value of the	Current value of the	
	Pensacola	FL	32507-0000		Land	entire property?	portion you own?	
	City	State	ZIP Code		Investment property	Unknown	Unknow	
					Timeshare	Describe the nature of y	our ownershin interest	
					Other	(such as fee simple, ten		
				_	has an interest in the property? Check one	a life estate), if known.		
	Escambia			ᆜ	Debtor 1 only	Fee simple		
	County				Debtor 2 only			
	County				Debtor 1 and Debtor 2 only	Check if this is community property		
					At least one of the debtors and another information you wish to add about this item	(see instructions)		
					erty identification number:	ii, sucii as iocai		
				Snu	g Harbor Condominium. k 17 reserved			
	S. 944 Christmas				Single-family home	Do not deduct secured claims or exemptions. Put		
	Street address, if available,	or other des	scription		Duplex or multi-unit building	the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property.		
					Condominium or cooperative			
					Manufactured or mobile home	Comment orders of the	Comment orders of the	
			53965-0000		Land	Current value of the entire property?	Current value of the	
	Wisconsin Dells	WI			20.10	entire property:	portion you own?	
	City City	WI State	ZIP Code		Investment property	Unknown	• •	
						Unknown	Unknow	
				□ ■ □	Investment property	Unknown  Describe the nature of y (such as fee simple, ten	Unknow	
				Who	Investment property Timeshare Other has an interest in the property? Check one	Unknown  Describe the nature of y (such as fee simple, ten a life estate), if known.	Unknow	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Unknown  Describe the nature of y (such as fee simple, ten	Unknow	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Unknown  Describe the nature of y (such as fee simple, ten a life estate), if known.	Unknow	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the nature of y (such as fee simple, ten a life estate), if known.  Time Share	Unknow your ownership interest ancy by the entireties, o	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Unknown  Describe the nature of y (such as fee simple, ten a life estate), if known.  Time Share  Check if this is con (see instructions)	Unknow your ownership interest ancy by the entireties, o	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item erty identification number:	Unknown  Describe the nature of y (such as fee simple, ten a life estate), if known.  Time Share  Check if this is con (see instructions)	Unknow your ownership interest ancy by the entireties, o	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item	Unknown  Describe the nature of y (such as fee simple, ten a life estate), if known.  Time Share  Check if this is con (see instructions)	Unknow your ownership interest ancy by the entireties, o	
	City			Who	Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item erty identification number:	Unknown  Describe the nature of y (such as fee simple, ten a life estate), if known.  Time Share  Check if this is con (see instructions)	Unknow your ownership interest ancy by the entireties,	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Schedule A/B: Property

page 2

Debtor 1 John C. Yasch Debtor 2 Toni K. Yasch					Case number (if known)			
		trucks, tractors, spor	t utility ve	nicles, motorcycles				
3.1	Make: Model: Year:	Chevy Equinox 2010 nate mileage: 1	07,047	Who has an interest in the property? Check one  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	the amount of any s	red claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property.  The Current value of the portion you own?		
	Other inf	ormation: FMV: KBE		☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$6,303.			
3.2			37,500	Who has an interest in the property? Check one  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any s	red claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property.  Current value of the portion you own?		
	Poor c value Wheel Breaks dent in Interior (Stains Air bag	ormation: ondition: FMV: Sci Well (drivers side), s, broken tie rod, tire the front bumper) r in bad condition s) g repair light will no VS brake light.	es,	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$0.	00 \$0.00		
Exa	amples: B  No  Yes  dd the do	oats, trailers, motors, po	ersonal wa on you ow t 2. Write t	d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcycon for all of your entries from Part 2, including that number here	cle accessories g any entries for	\$6,303.00		
·				erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
<i>E</i> >	kamples: I No	goods and furnishing Major appliances, furnit scribe		china, kitchenware				
		Furnitu	re & hou	sehold goods		\$1,875.00		
E>	No		-	eo, stereo, and digital equipment; computers, pr edia players, games	rinters, scanners; music co	llections; electronic devices		

Official Form 106A/B Schedule A/B: Property

page 3

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

Official Form 106A/B Schedule A/B: Property

page 4

	ohn C. Yasch oni K. Yasch		Case number (if known)	
■ Yes				
			Cash	\$21.00
_	Checking, savings, o		ounts; certificates of deposit; shares in credit unions, brokerage houses, as with the same institution, list each.	and other similar
□ No ■ Yes			Institution name:	
		Checking	Checking Account with Firefighters Credit Union (6109) (payroll directly deposited)	\$458.57
	17.2.	HSA	Health Savings Plan with current employer	\$735.39
	17.3.	Savings	Savings Account with Firefighters Credit Union	\$5.00
	17.4.	savings	Flex Spending account with current employer	\$1,807.84
joint ventu ■ No □ Yes. Give	e specific information	about themme of entity:	 % of ownership:	
20. <b>Governmer</b> Negotiable Non-negoti ■ No	Na nt and corporate bo instruments include p	me of entity:  nds and other negopersonal checks, can those you cannot trans		
04 Potiroment		uer name:		
	or pension accoun Interests in IRA, ERI		403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes. List e	each account separa Type	tely. of account:	Institution name:	
	401		401k plan with current employer	\$8,748.81
Your share Examples:		ts you have made so	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or o	thers
■ No □ Yes			Institution name or individual:	
23. <b>Annuities</b> (	A contract for a perio	dic payment of mon	ey to you, either for life or for a number of years)	
Yes	Issuer nam	ne and description.		
24. Interests in	an education IRA, i	n an account in a c	qualified ABLE program, or under a qualified state tuition program.	

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

page 5

Schedule A/B: Property

Official Form 106A/B

Debto Debto		John C. Yasch Toni K. Yasch		Case number (if known)			
	No		9A(b), and 529(b)(1). tution name and description. Separately file the record	ds of any interests.11 U.S.C. § 521(c):			
	No		re interests in property (other than anything listed mation about them	in line 1), and rights or powers exercis	able for your benefit		
E ■	xamp No	les: Internet domai	lemarks, trade secrets, and other intellectual proper in names, websites, proceeds from royalties and licens				
27. <b>Li</b>	cens xamp	es, franchises, an	mation about them  d other general intangibles ts, exclusive licenses, cooperative association holding	gs, liquor licenses, professional licenses			
		Give specific infor	mation about them				
Mone	y or	property owed to	you?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
_	28. Tax refunds owed to you  ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years						
<i>E</i>	29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  ■ No  □ Yes. Give specific information						
<i>E</i>	xamp No		, disability insurance payments, disability benefits, sicl id loans you made to someone else	k pay, vacation pay, workers' compensat	ion, Social Security		
31. <b>In</b>	teres xamp	ts in insurance po		edit, homeowner's, or renter's insurance			
		Name the insuranc	e company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:		
			Short Term Disability with current employer; No CSV		\$0.00		
			Adjustable Variable Life Insurance with Penn Mutual (4612) (loan against policy) net cash value	Lori Bell - Sister	\$403.85		
			Child Term Life Insurance through current employerl; No CSV	Mother - Toni Yasch	\$0.00		
			Child Term Life Insurancethrough current employerl; No CSV	Mother - Toni Yasch	\$0.00		

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1 Debtor 2	John C. Yasch Toni K. Yasch		Case number (if known)	
		Term Life Insurance through current employer for John Yasch; No CSV	Toni Yasch	\$0.00
		Group Term Life Insurance through current employer; No CSV	Wife - Toni Yasch	\$0.00
If you some		nat is due you from someone who has died i a living trust, expect proceeds from a life insurance	policy, or are currently entitled to rec	eive property because
L res	. Give specific inform	ation		
		es, whether or not you have filed a lawsuit or ma oyment disputes, insurance claims, or rights to sue	de a demand for payment	
	. Describe each claim	1		
34. <b>Other</b> ■ No	contingent and unli	quidated claims of every nature, including count	erclaims of the debtor and rights t	o set off claims
_	. Describe each claim	ı		
35. <b>Any fi</b> ■ No	nancial assets you o	lid not already list		
_	. Give specific inform	ation		
		II of your entries from Part 4, including any entri	. •	\$12,180.46
Part 5: Do	escribe Any Business-F	Related Property You Own or Have an Interest In. List a	ny real estate in Part 1.	
_ `	own or have any legal	or equitable interest in any business-related property?		
_	Go to line 38.			
		Commercial Fishing-Related Property You Own or Have est in farmland, list it in Part 1.	e an Interest In.	
46. <b>Do yo</b>	u own or have any le	egal or equitable interest in any farm- or commer	cial fishing-related property?	
■ No	. Go to Part 7.			
☐ Ye	s. Go to line 47.			
Part 7:	Describe All Proper	ty You Own or Have an Interest in That You Did Not Lis	Above	
		ty of any kind you did not already list? country club membership		
☐ Yes	. Give specific informa	ation		
54. <b>Add</b>	the dollar value of a	II of your entries from Part 7. Write that number I	nere	\$0.00

Official Form 106A/B Schedule A/B: Property page 7

John C. Yasch Debtor 1 Debtor 2 Toni K. Yasch Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$54,100.00 56. Part 2: Total vehicles, line 5 \$6,303.00 57. Part 3: Total personal and household items, line 15 \$3,845.00 58. Part 4: Total financial assets, line 36 \$12,180.46 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$22,328.46 Copy personal property total \$22,328.46

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$76,428.46

INSTR # 2008000171042, Doc Type D, Pages 1, Recorded 06/25/2008 at 02:32 PM, Charlie Green, Lee County Clerk of Circuit Court, Deed Doc. D \$0.70 Rec. Fee \$10.00 Deputy Clerk DMAYS

10.00	
The state of the s	<del>-</del>
La boune K. Kewnitz	
823 E. Milwaukee ST.	
Janesville, Lui. 53545	
Tani K. Kemuitz - Vasch i J	Tohu Vasch
623 2 William Kee St /3407 S	herry here
Januari Be, tol. 53545 Clerch	
the following described real estate in	County,
State of Wisconsin.	RETURN TO
Florida	<b>:</b>
UNIT WEEK NUMBER 304;17	
of MARINA VILLAGE AT SNUG HARBOR CONDOMINIU	M, a condominium
according to the Declaraton of Condominum of SNUG HARBOR CONDOMINIUM as recorded in office.	I MAKINA VILLAGE TAR Parcel No:
of Lee County, Florida and any and all amen	dments thereto, if any. The address of
said Condominum is:	•
MARINA VILLAGE AT SNUG HARBOR	
645 San Carlos Blvd.	
Fort Myers Beach, FL 33931	
(813) 463-3949	
	•
	·
	·
	·
	·
This	
This	
This	March 19 92
Dated this day of	March 19 92
Dated this day of(SEAL)	1001
Dated this day of	· Carol K. Weide (SEA
Dated this day of (SEAL)	· Carol K. Weide (SEA
Dated this 30+h day of	1001

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

In re:		) Case No.
	John C. Yasch Toni K. Yasch	) Chapter 13
	Debtor(s)	) Judge
		) DECLARATION RE: ELECTRONIC ) FILING OF DOCUMENTS AND ) STATEMENT OF SOCIAL SECURITY ) NUMBER
Part I -	Declaration of Petitioner	
as well sending United S I am aw	rmation I have given my attorney and the information pro- as in any other documents that must contain original sig my petition, this declaration, statements, and schedules, ar States Bankruptcy Court. The DECLARATION RE: ELEC- ware that I may proceed under chapter 7, 11, 12 or 13 of	indersigned debtor(s), hereby declare under penalty of perjury that rided in the electronically filed petition, statements, and schedules natures, is true, correct, and complete. I consent to my attorney d any other documents that must contain original signatures, to the TRONIC FILING shall be filed the same day the petition is filed.
under ea	ach chapter, and choose to proceed under the chapter specif	ed in the petition.
I [We] <b>f</b> □ □	electronic case opening process, is true, correct, and comp I, the Debtor, do not have a Social Security Number.	to my attorney, which will be submitted to the Court as part of the lete.  given to my attorney, which will be submitted to the Court as par
	[Check box if petitioner is a corporation or partnership] the petition is true, correct, and complete, and that I have debtor requests relief in accordance with the chapter speci	
Dated:	November 13, 2017 Signed: John C. Yasch (Debtor)	Toni K. Yasch (Co-Debtor)
Part II	- Declaration of Attorney	
or any of with the Electron schedulthey are under of declarate	to the best of my knowledge. The debtor(s) will have sign other documents that must contain original signatures. I we united States Bankruptcy Court, and have followed a nic Case Filing (ECF) Administrative Procedures Manual. es, and statements, and any other documents that must conte true, correct, and complete. If an individual, I further dechapter 7, 11, 12, or 13 of Title 11, United States Code, an	the above debtor's petition and that the information is complete and this form before I submit the petition, schedules, and statements Il give the debtor(s) a copy of all forms and information to be filed other requirements of <u>Local Bankruptcy Rule 5005-4</u> and the I further declare that I have examined the above debtor's petition ain original signatures, and to the best of my knowledge and belief are that I have informed the petitioner that [he or she] may proceed have explained the relief available under each such chapter. This edge I understand that failure to file the signed original of this

Attorney for Debtor(s)

November 13, 2017

Dated:

Fill in this infor	mation to identify your	case:		
Debtor 1	John C. Yasch			
	First Name	Middle Name	Last Name	
Debtor 2	Toni K. Yasch			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an
				amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exempti-	ions are you claiming	? Check one only	, even if your	spouse is filing with you.
----	-----------------------	-----------------------	------------------	----------------	----------------------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own  Copy the value from Schedule A/B  Check only one box for each exemption.		ck only one box for each exemption.	Specific laws that allow exemption	
13407 Sherry Avenue Cleveland, OH 44135 Cuyahoga County	\$54,100.00	•	\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
PPN: 023-10-033; FMV: Cuyahoga County Auditor Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit		
Furniture & household goods Line from Schedule A/B: 6.1	\$1,875.00		\$1,875.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Elle Holli Goriodale 772. G.1			100% of fair market value, up to any applicable statutory limit	2020:00(1)(4)(0)	
4 Older TV's, 4 Cell phones, 4 IPad (used and abused), Computer (older)	\$700.00		\$700.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
4 - laptops (used and abused) Line from <i>Schedule A/B</i> : <b>7.1</b>	,		100% of fair market value, up to any applicable statutory limit	2020:00(1)(4)(0)	
4 older bicycles Line from Schedule A/B: 9.1	\$20.00		\$20.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Ellie Holli Genedale 742. G.1			100% of fair market value, up to any applicable statutory limit	2020:00(1)(4)(0)	
Used Clothing Line from Schedule A/B: 11.1	\$750.00		\$750.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Elle Hall Genedale PVD. 1111			100% of fair market value, up to any applicable statutory limit	<u> </u>	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	The state of the s		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Wedding rings & costume Jewelry Line from Schedule A/B: 12.1	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
				100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$21.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Zino nom osnodalo 702. Terr			100% of fair market value, up to any applicable statutory limit	2020:00(-),(0)	
	Checking: Checking Account with Firefighters Credit Union (6109)	\$458.57		75%	Ohio Rev. Code Ann. § 2329.66(A)(13)	
	(payroll directly deposited) Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	2020.00(/1)(10)	
	Checking: Checking Account with Firefighters Credit Union (6109)	\$458.57		\$114.64	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	(payroll directly deposited) Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	(	
	HSA: Health Savings Plan with current employer	\$735.39		\$735.39	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(1:0)	
	Savings: Savings Account with Firefighters Credit Union	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(-10)	
	savings: Flex Spending account with current employer	\$1,807.84		\$950.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
	Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	2020:00(-),(0)	
	savings: Flex Spending account with current employer	\$1,807.84		\$857.84	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	2020.00(/1)(10)	
	401: 401k plan with current employer Line from Schedule A/B: 21.1	\$8,748.81		\$8,748.81	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	
				100% of fair market value, up to any applicable statutory limit		
	Adjustable Variable Life Insurance with Penn Mutual (4612) (loan	\$403.85		\$403.85	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	against policy) net cash value Beneficiary: Lori Bell - Sister Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			led on or after the date of adjustme	nt.)	
	Yes. Did you acquire the property covered No Yes	ed by the exemption wi	thin 1	,215 days before you filed this case	?	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

Fill in this inform	ation to id	entify your	case:				
Debtor 1	John C	. Yasch					
	First Name		Middle Name	Last Name			
Debtor 2	Toni K.	Yasch	Middle Mana	Last Name			
(Spouse if, filing)	First Name		Middle Name	Last Name			
United States Ban	kruptcy Co	urt for the:	NORTHERN DISTRICT OF O	HIO			
Case number							
(if known)							if this is an
						ameno	led filing
Official Form	106D						
Schedule I	D: Cre	ditors	Who Have Claims	Secure	ed by Property	/	12/15
					<u> </u>		tion If more once
is needed, copy the			two married people are filing toget ut, number the entries, and attach it				
number (if known).		برط لممسوم	value meanantis?				
1. Do any creditors h		-	your property? is form to the court with your othe	or echodulos	Vou have nothing also to	roport on this form	
_			•	si scriedules.	Tou have nothing else to	report on this form.	
■ Yes. Fill in			elow.				
	Secured 0				. Column A	Column B	Column C
			ore than one secured claim, list the cr a particular claim, list the other credito		ely	Value of collateral	Unsecured
			al order according to the creditor's nar		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Blue Green	n Corp.		Describe the property that secures	the claim:	\$8,800.00	Unknown	Unknown
Creditor's Name			S. 944 Christmas Mountain				
			Wisconsin Dells, WI 53965	Sau			
4960 Confe	erence W	ay N	County Time share				
#100 Attn: Presi	ident	L	As of the date you file, the claim is	: Check all that			
Boca Rato		31	apply.  Contingent				
Number, Street,	City, State & Zi	ip Code	Unliquidated				
	10 5		Disputed				
Who owes the dek	ot? Check or	ne.	Nature of lien. Check all that apply.  ☐ An agreement you made (such as		occured		
Debtor 2 only			car loan)	s mortgage or s	secureu		
■ Debtor 1 and Deb	otor 2 only		☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	e debtors an	d another	☐ Judgment lien from a lawsuit				
☐ Check if this cla		оа	Other (including a right to offset)	time shar	re e		
community deb	τ						
Date debt was incu	rred 2008	3	Last 4 digits of account nun	nber 2477	<u> </u>		
2.2 GM Financ	ial		Describe the property that secures	the claim:	\$15,404.00	\$6,303.00	\$9,101.00
Creditor's Name	iai		2010 Chevy Equinox 107,04		ψ13, <del>404.00</del>	Ψ0,303.00	ψ9,101.00
			Fair Condition: FMV: KBB	** ***			
	~444=		As of the date you file, the claim is	Check all that			
P.O. Box 1 Arlington,		•	apply.				
Number, Street,		_	☐ Contingent ☐ Unliquidated				
rumber, eneet,	o.i.y, olalo a 2.	,p codo	Disputed				
Who owes the deb	ot? Check or	ne.	Nature of lien. Check all that apply.				
Debtor 1 only			An agreement you made (such as	s mortgage or s	secured		
Debtor 2 only			car loan)				
☐ Debtor 1 and Deb	•	d another	☐ Statutory lien (such as tax lien, mo☐ Judgment lien from a lawsuit	echanic's lien)			
☐ Check if this cla			<ul><li>Other (including a right to offset)</li></ul>	auto loan	1		
community deb			— Carer (including a right to offset)				
Date debt was incu	rred <b>9/20</b>	13	Last 4 digits of account nun	nber 5864	ļ		
			=				

Schedule D: Creditors Who Have Claims Secured by Property Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Official Form 106D

page 1 of 2 Best Case Bankruptcy

Debtor 1 John C. Yasch			Ca	se number (if know)		
	Middle Name	Last Name	<del></del>			
Debtor 2 Toni K. Yasch						
First Name	Middle Name	Last Name				
2.3 PNC Mortgage	Describe to	he property that secures	the claim:	\$84,117.00	\$54,100.00	\$30,017.00
Creditor's Name	44135 C PPN: 02 County		/ahoga			
P.O. Box 8703		late you file, the claim is	: Check all that			
Dayton, OH 45401	apply.  ☐ Conting	ent				
Number, Street, City, State & Zip Co						
	☐ Dispute	d				
Who owes the debt? Check one.	Nature of	lien. Check all that apply.				
☐ Debtor 1 only	■ An agre	ement you made (such as	mortgage or secure	ed		
Debtor 2 only	car loa	n)				
■ Debtor 1 and Debtor 2 only	☐ Statutor	y lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and an	other	nt lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (i	ncluding a right to offset)	Mortgage			
Date debt was incurred 12/2012	2 Las	t 4 digits of account nun	nber			
Add the dollar value of your entri		• •		\$108,321.0	00	
If this is the last page of your for Write that number here:	m, add the dollar va	llue totals from all pages	S.	\$108,321.0	00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Fill in this info	rmation to identify your	case:					
Debtor 1	John C. Yasch						
	First Name	Middle Name	Last Nam	9			
Debtor 2 (Spouse if, filing)	Toni K. Yasch First Name	Middle Name	Last Nam	<u> </u>			
United States E	Bankruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO				
Case number							
(if known)						_	if this is an led filing
Be as complete a any executory co Schedule G: Exe	m 106E/F E/F: Creditors W and accurate as possible. Us intracts or unexpired leases cutory Contracts and Unexp ditors Who Have Claims Sec	e Part 1 for creditors that could result in a ired Leases (Official	with PRIORITY claims a claim. Also list executo Form 106G). Do not inclu	nd Part 2 fo ry contract ide any cre	s on Schedule A/B: F ditors with partially s	Property (Official For secured claims that a	m 106A/B) and on ire listed in
eft. Attach the C	ontinuation Page to this pag umber (if known).						
Part 1: List	All of Your PRIORITY Un	secured Claims					
1. Do any cred	itors have priority unsecure	d claims against you	?				
☐ No. Go to	Part 2.						
Yes.							
identify what possible, list	our priority unsecured claims type of claim it is. If a claim ha the claims in alphabetical orde te than one creditor holds a pa	s both priority and noner according to the cred	priority amounts, list that o litor's name. If you have m	laim here a	nd show both priority a	and nonpriority amoun	ts. As much as
(For an expla	anation of each type of claim, s	ee the instructions for	this form in the instruction	booklet.)	Total claim	Priority	Nonpriority
						amount	amount
	al Revenue Service	Last 4 d	igits of account number	3375	\$3,047.00	\$3,047.00	\$0.00
	Creditor's Name  Box 7346	When w	as the debt incurred?	2013			
Attn:	Central Insolvency Gr	oup				_	
	delphia, PA 19101-7346 Street City State Zlp Code		e date you file, the claim	is: Chack a	II that apply		
	red the debt? Check one.	_		is. Check a	ш шасарріу		
Debtor		☐ Conti					
		☐ Unliq					
Debtor 2		☐ Dispu					
■ Debtor	1 and Debtor 2 only		PRIORITY unsecured cla	im:			
☐ At least	one of the debtors and anothe	er 🔲 Dome	estic support obligations				
☐ Check i	f this claim is for a commur	nity debt Taxe	s and certain other debts y	ou owe the	government		
	n subject to offset?		ns for death or personal in				
■ No		☐ Othe	. Specify				
☐ Yes		50	Income Ta	x			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

Debtor 1 John C. Yasch Debtor 2 Toni K. Yasch		Case nu	ımber (if know)		
2.2 Internal Revenue Service	Last 4 digits of account number	3375	\$2,549.00	\$0.00	\$2,549.00
Priority Creditor's Name P.O. Box 7346 Attn: Central Insolvency Group	When was the debt incurred?	2011		<u> </u>	, ,, , , , , , , , , , , , , , , , , , ,
Philadelphia, PA 19101-7346  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all t	that apply		
Who incurred the debt? Check one.	☐ Contingent				
☐ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	ıim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt  Is the claim subject to offset?	■ Taxes and certain other debts y □ Claims for death or personal in	_			
■ No	Other. Specify				
Yes	Income Ta	х			
2.3 Internal Revenue Service Priority Creditor's Name P.O. Box 7346 Attn: Central Insolvency Group	Last 4 digits of account number When was the debt incurred?	3375 2016	\$3,484.09	\$3,484.09	\$0.00
Philadelphia, PA 19101-7346	According to the control of the cont				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all t	тпат арріу		
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed  Type of PRIORITY unsecured cla	im:			
·	Domestic support obligations				
☐ At least one of the debtors and another	_				
☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul><li>■ Taxes and certain other debts y</li><li>□ Claims for death or personal inj</li></ul>	_			
■ No	☐ Other. Specify				
Yes	Income Ta	x			
Part 2: List All of Your NONPRIORITY Unsect	ured Claims				
3. Do any creditors have nonpriority unsecured claim	ns against you?				
$\square$ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
■ Yes.					

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Debtor Debtor	1 John C. Yasch 2 Toni K. Yasch	Case number (if know)	
4.1	CheckSmart Nonpriority Creditor's Name	Last 4 digits of account number	\$1,300.00
	Attn: President 7001 Post Road, Suite 200 Dublin, OH 43016	When was the debt incurred? 6/2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Payday Loan	
4.2	CheckSmart Nonpriority Creditor's Name	Last 4 digits of account number	\$1,600.00
	Attn: James Frauenberg II, Presiden 7001 Post Road, Suite 200	When was the debt incurred? 6/2017	
	Dublin, OH 43016  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Payday Loan	
4.3	Cleveland Clinic	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Attn: Tom Mihaljevic, CEO 9500 Euclid Avenue Cleveland, OH 44195	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 11

Debtor Debtor	John C. Yasch Toni K. Yasch		Case number (if know)	
4.4	Credit Bureau of Stark	Last 4 digits of account number	6885	\$4,139.00
	Nonpriority Creditor's Name Attn: Alex A. Gonyias, President 6973 Promway Ave NW North Canton, OH 44720	When was the debt incurred?	2017	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical co	lection	
4.5	Credit First National Assoc.	Last 4 digits of account number	8635	\$666.00
	Nonpriority Creditor's Name Attn: Brian Zempel, CEO & President 6275 Eastland Road	When was the debt incurred?	2010	
	Brookpark, OH 44142  Number Street City State Zlp Code		e. Charle all that apply	
	Who incurred the debt? Check one.	ne.  Contingent Unliquidated	s: Спеск ан mat арргу	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	Dept of Ed/Navient Nonpriority Creditor's Name	Last 4 digits of account number	1E00	\$84,635.00
	Attn: A. Wayne Johnson, COO 123 Justison Street, 3rd Fl Wilmington, DE 19801	When was the debt incurred?	3/2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	• •	
	Yes	Other. Specify Student Lo	an	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 11

Debtor Debtor	John C. Yasch Toni K. Yasch		Case number (if know)	
4.7	Firestone Nonpriority Creditor's Name	Last 4 digits of account number		\$666.00
	Attn: Gary Garfield, CEO 50 Century Blvd. Nashville, TN 37214	When was the debt incurred?	2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.8	Great American Finance	Last 4 digits of account number	5184	\$751.00
	Nonpriority Creditor's Name 20 North Upper Wacker Drive, #2275 Chicago, IL 60606	When was the debt incurred?	9/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Personal Ic	pan	
4.9	JC Penney's Nonpriority Creditor's Name	Last 4 digits of account number	0346	\$171.00
	Attn: Marvin Ellison, CEO 6501 Legacy Drive Plano, TX 75024	When was the debt incurred?	9/2003	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	□Yes	Other. Specify Credit Card	<u> </u>	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 11

Kohl's Nonpriority Creditor's Name	Last 4 digits of account number	8270	\$413.00
Attn: Kevin Mansell, CEO N56 W17000 Ridgewood Drive Menomonee Falls, WI 53051 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?	11/2009	
	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
<ul> <li>□ Debtor 2 only</li> <li>■ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>	☐ Unliquidated		
	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Onemain Financial	Last 4 digits of account number	1158	\$4,803.00
Nonpriority Creditor's Name Attn: Jay Levine, President/CEO 601 N.W. Second Street	When was the debt incurred?	6/2014	
Evansville, IN 47708-1013  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify Personal Lo	oan	
Pennsylvania Higher Education  Nonpriority Creditor's Name	Last 4 digits of account number		\$33,788.0
Attn: James Preston, President/CEO	When was the debt incurred?	2013	
1200 North 7th Street Harrisburg, PA 17102 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	■ Other Specify Student Lo		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 11

Nonpriority Creditor's Name			
Nonpriority Creditor's Name	Last 4 digits of account number	6915	\$2,735.0
Attn: William Demchak, CEO 300 Fifth Avenue Pittsburgh, PA 15222	When was the debt incurred?	8/2007	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.	
At least one of the debtors and another	Student loans	u Ciaiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Credit Card		
PNC Bank	Last 4 digits of account number	3856	\$366.0
Nonpriority Creditor's Name	_		φοσοι
Attn: William Demchak, CEO 300 Fifth Avenue Pittsburgh, PA 15222	When was the debt incurred?	2/1999	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Line of Cre	dit	
Regional Acceptance Corp.	Last 4 digits of account number	01	\$23,187.0
Nonpriority Creditor's Name Attn: W. R. Stallings Sr President/CEO	When was the debt incurred?	8/2010	
1424 East Fire Tower Road Greenville, NC 27858			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<u> </u>	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Auto Loan	Deficiency	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 11

Debtor 1 John C. Yasch Toni K. Yasch	Case number (if know)	
.1 Robert M. Stern MD	Last 4 digits of account number	\$100.00
Nonpriority Creditor's Name 29101 Health Campus Dr # 340, Westlake, OH 44145	When was the debt incurred? 2016	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	
Southwest General Hosptial	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name Attn: William Young, President/CEO 18697 Bagley Road	When was the debt incurred?	
Middleburg Heights, OH 44130-3497  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	у стана у стана, на стана стопом ан шам арриу	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	
Sychrony Bank	Last 4 digits of account number	\$1,465.00
Nonpriority Creditor's Name Attn: Margaret Keane,	When was the debt incurred?	
President/CEO 170 West Election Road, Suite 125 i Draper, UT 84020  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other, Specify Credit Card	
<b>∟</b> 1€5	Uther Specify Ordan Cana	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 11

	Case number (if know)		
Target Nonpriority Creditor's Name	Last 4 digits of account number	\$2,440.00	
Attn: Brian Cornell, CEO 1000 Nicollet Mall Minneapolis, MN 55403 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? 11/2007		
	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Univeristy Hospital Parma Med. Cnt	Last 4 digits of account number	8598	\$856.0
Nonpriority Creditor's Name Thomas F. Zenty III, CEO 11100 Euclid Avenue	When was the debt incurred?	2/2017	
Cleveland, OH 44106			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	П о		
Debtor 2 only	☐ Contingent ☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Medical		
University Coop Medical Cot			<b>\$04.</b>
University Case Medical Cnt  Nonpriority Creditor's Name	Last 4 digits of account number		\$91.
Thomas F. Zenty III, CEO 11100 Euclid Avenue	When was the debt incurred?	2016	
Cleveland, OH 44106  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Medical		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 11

Deb	tor 2 Toni K. Yasch		Case number (if know)				
4.2 2	Value City Furniture Corp Headq.	Last 4 digits of account numbe	r 1122	\$1,464.00			
	Nonpriority Creditor's Name Attn: Jay Schottenstein, Principal 4300 E 5th Avenue	When was the debt incurred?	8/2016				
	Columbus, OH 43219  Number Street City State Zlp Code	As of the date you file, the clair	n is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
Debtor 2 only		☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a se report as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts				
	☐ Yes	Other. Specify Credit Ca	rd				
Part	3: List Others to Be Notified About a De	ebt That You Already Listed					
is t	e this page only if you have others to be notified trying to collect from you for a debt you owe to s we more than one creditor for any of the debts th tified for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection a	gency here. Similarly, if you			
	e and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?				
	orney General of The US Pennsylvania Avenue, NW		Part 1: Creditors with Priority Unsecure				
	shington, DC 20530		Part 2: Creditors with Nonpriority Unse	cured Claims			
	Jg.c, 2 0 2000	Last 4 digits of account number					
Nam	e and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?				
	alry SPV I, LLC		☐ Part 1: Creditors with Priority Unsecure	d Claims			
	Summit Lake Drive, #400		■ Part 2: Creditors with Nonpriority Unse	cured Claims			
vali	halla, NY 10595	Last 4 digits of account number					
Nam	e and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?				
	E Group Inc	Line 2.2 of (Check one):	■ Part 1: Creditors with Priority Unsecure	d Claims			
	9 Technology Pkwy		☐ Part 2: Creditors with Nonpriority Unse	cured Claims			
Ced	lar Falls, IA 50613	Last 4 digits of account number					
Nam	e and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?				
	atralized Business Solutions		Part 1: Creditors with Priority Unsecure	d Claims			
_	. Box 2714		■ Part 2: Creditors with Nonpriority Unse	cured Claims			
Nor	th Canton, OH 44720	Last 4 digits of account number					
	e and Address ig Relman, Esq.	On which entry in Part 1 or Part 2 did you Line <b>4.15</b> of ( <i>Check one</i> ):	ou list the original creditor?  □ Part 1: Creditors with Priority Unsecure	d Claims			
	11 Chagrin Blvd, #160		Part 2: Creditors with Nonpriority Unse				
	chwood, OH 44122		- Part 2. Creditors with Nonphority onse	cured Ciairiis			
		Last 4 digits of account number					
		On which entry in Part 1 or Part 2 did yo					
	rahoga County Clerk of Court 0 Ontario Street		Part 1: Creditors with Priority Unsecure				
	se No: 17CJ813542		Part 2: Creditors with Nonpriority Unse	cured Claims			
	veland, OH 44113						
		Last 4 digits of account number					
	e and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?				
FFC		Line <b>4.21</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecure				
<b>24</b> /	00 Chagrin Blvd, #205		Part 2: Craditors with Nappriority Upsa				

Beachwood, OH 44122

Last 4 digits of account number

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 11

Official Form 106 E/F

Name and Address Internal Revenue Service Insolvency Group 6 1240 East Ninth Street, Room 493 Cleveland, OH 44199	On which entry in Part 1 or Part Line <b>2.1</b> of ( <i>Check one</i> ):	2 did you list the original creditor?  ■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims		
Cievelanu, On 44199	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Office of the US Attorney	Line <b>2.1</b> of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims		
Attn: Bankruptcy Section 801 West Superior Ave #400 Cleveland, OH 44113-1852		☐ Part 2: Creditors with Nonpriority Unsecured Claims		
0107014114, 011 44110 1002	Last 4 digits of account number			

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 9,080.09
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 9,080.09
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 165,636.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 165,636.00

Fill in this infor	mation to identify your	case:			
Debtor 1	John C. Yasch				
	First Name	Middle Name	Last Name		
Debtor 2	Toni K. Yasch				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3			<u> </u>		
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del>_</del>
2.4	,		, 5.13.15		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5	Oity		State	Zii Oode	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in thi	s information to identify your	case:			
Debtor 1	John C. Yasch				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	Toni K. Yasch First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case nur	nber				☐ Check if this is an amended filing
Ott: -: -	- L Commo 400LL				amended liling
	al Form 106H dule H: Your Cod	ebtors			12/15
people ar	s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known)	ally responsible for supposes on the left. Attach	olying correct information the Additional Page to t	n. If more space is need	ded, copy the Additional Page,
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse as	a codebtor.	
	)				
■ Ye	es				
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,				ates and territories include
■ No	o. Go to line 3.				
_	es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in lin Forn	ie 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make su	re you have listed the o	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The credit Check all schedules the	or to whom you owe the debt hat apply:
3.1	Kerrie Williams 26134 RAIN TREE BLVD Olmsted Falls, OH 44138 Auto Ioan			☐ Schedule D, line ■ Schedule E/F, lin ☐ Schedule G Regional Acceptar	e 4.15

Fill in this information	to identify your case:		
Debtor 1	John C. Yasch		
Debtor 2 (Spouse, if filing)	Toni K. Yasch		
United States Bankru	ptcy Court for the: NORTHERN DISTRIC	T OF OHIO	
Case number		Cr	neck if this is:
(If known)			An amended filing
			A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u> 106l</u>		MM / DD/ YYYY
Schedule I:	Your Income		12/15
supplying correct int spouse. If you are se attach a separate sho	ormation. If you are married and not filin parated and your spouse is not filing wit eet to this form. On the top of any addition	g jointly, and your spouse is living w h you, do not include information abo	ebtor 2), both are equally responsible for ith you, include information about your out your spouse. If more space is needed, number (if known). Answer every question.
Part 1: Descri	be Employment		
<ol> <li>Fill in your emp information.</li> </ol>	oloyment	Debtor 1	Debtor 2 or non-filing spouse

Part 2: Give Details About Monthly Income

If you have more than one job,

Include part-time, seasonal, or

Occupation may include student

or homemaker, if it applies.

self-employed work.

attach a separate page with

information about additional

employers.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

■ Employed

**Assembler** 

■ Not employed

676 Alpha Drive

Cleveland, OH 44143

6 years

**Gooch & Housego Ohio LLC** 

**Employment status** 

**Employer's name** 

**Employer's address** 

How long employed there?

Occupation

Employed

RN

■ Not employed

Humana at Home, Inc

**500 West Main Street** 

Louisville, KY 40202

1 year

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3.166.80 6,204.81 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3 +\$ 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 4 3,166.80 6,204.81

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				F	For Debtor 1	For Debtor		
	Conv	line 4 hore	1		\$ 3.166.80	non-filing s	-	
	Сору	line 4 here	4.		\$3,166.80_	Φ	,204.81	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 620.88	\$ 1	,671.02	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$ 0.00	\$	0.00	
	5e.	Insurance	5e.		\$ 0.00	\$	339.26	
	5f.	Domestic support obligations	5f.		\$ 0.00	\$	0.00	
	5g.	Union dues	5g.		\$ 0.00	\$	0.00	
	5g. 5h.	Other deductions. Specify: Vol term Life Insurance child VTL	5h.+			· · · · · · · · · · · · · · · · · · ·	2.38	
	JII.	· · · · <u></u>				\$		
		Vol term Life Insurance employee VTL EE	_			\$	22.53	
		VTL spouse Vol Suppl Benefits HSA	_			Φ	16.68	
			_		:	\$	109.89	
		HSA	_				216.67	
		Group Term Life Insurance	_			\$ \$	0.00	
		Flex Spending Account	_		:	φ	0.00	
		Post Tax Deduction	_			ф	0.00	
		Pre Tax Deduction	_		\$ 4.44	\$	0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$			,378.43	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,267.88	\$3	,826.38	
9.	8a. 8b. 8c. 8d. 8e. 8f.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:  all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8c. 8d. 8e.		\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
10.	Calcı	ulate monthly income. Add line 7 + line 9.	10. \$		2,267.88 + \$	3,826.38	= \$	6,094.26
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ľ			,	1 L	, <b>-</b>
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depen		•	ed in <i>Schedul</i>	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaines					\$	6,094.26
							Combine	ed

monthly income

Debtor 1 Debtor 2	Debtor 1 John C. Yasch Debtor 2 Toni K. Yasch		
13. <b>Do</b>	you expect an incr	ease or decrease within the year after you file this form?	
	No.		
	Yes. Explain:		

Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	John C. Yas	ch			Check	c if this is:	
	tor 2 buse, if filing)	Toni K. Yaso						ving postpetition chapter the following date:
``						_	·	
Unit	ed States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF OHIO		N	//M / DD / YYYY	
1	e number nown)							
		rm 106J						
		J: Your						12/15
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Par		ribe Your House	hold					
1.	Is this a join  ☐ No. Go to							
	_	es Debtor 2 live i	in a sonar	ate household?				
			п а зераг	ate nousenoid:				
	■ N		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do vou hav	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Daughter		10	Yes
					Daughter		16	□ No ■
					Daugnter			■ Yes □ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses of	penses include of people other to d your depende	han $_{oldsymbol{\sqcap}}$	No Yes				
Est	imate your e	a date after the l	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it cluded it on <i>Schedule I:</i> Y			Your expe	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	4. \$		675.00
		ded in line 4:	- 9.04114 0			·		
	ii not inclu	ueu III IIIIle 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associat		upkeep expenses		4c. \$ 4d. \$		120.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

ebtor 2	John C. Yasch Toni K. Yasch	Case num	ber (if known)	
			,,	
Utiliti		0-	<b>c</b>	224.22
6a.	Electricity, heat, natural gas	6a.		304.00
6b.	Water, sewer, garbage collection	6b.	*	100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	610.00
6d.	Other. Specify:	6d.		0.00
	and housekeeping supplies	7.		1,100.00
-	care and children's education costs	8.	\$	100.00
	ing, laundry, and dry cleaning	9.	·	200.00
	onal care products and services	10.	\$	125.00
	cal and dental expenses	11.	\$	223.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	406.00
	ot include car payments.  Itainment, clubs, recreation, newspapers, magazines, and books	13.	· <u> </u>	320.00
	itable contributions and religious donations	14.		
	•	14.	Φ	0.00
. Insur	ance.  ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	145.00
	Health insurance	15b.	*	0.00
	Vehicle insurance	15b.		330.00
	Other insurance. Specify:	15d.	·	
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
Speci		16.	\$	0.00
. Instal	liment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		\$	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	0.00
	r payments you make to support others who do not live with you.	40	Φ	0.00
Speci	ny. r real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e	19.	our Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	· · · · · · · · · · · · · · · · · · ·	
	• •	20d.	· -	0.00
	Maintenance, repair, and upkeep expenses		·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
Otner	r: Specify: emergency reserve	21.	+\$	150.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	4,908.00
22b. (	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	4,908.00
. Calcu	alate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,094.26
	Copy your monthly expenses from line 22c above.	23a. 23b.		
۷۵۵.	Copy your monthly expenses from the 220 above.	۷۵۵.	-φ	4,908.00
23c.	Subtract your monthly expenses from your monthly income.		1.	
	The result is your monthly net income.	23c.	\$	1,186.26
	ou expect an increase or decrease in your expenses within the year after yo			ages or degrees beganing of a
For ex	ample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?	ır mortgage ı	payment to incre	ease of decrease because of a

Fill in this infor	mation to identify your	case:			
Debtor 1	John C. Yasch				
	First Name	Middle Name	Last Name		
Debtor 2	Toni K. Yasch				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)				☐ Ch	neck if this is an
				am	nended filing
			Debtor's Sch		12/15
obtaining mone		n connection with a bank		Making a false statement, conce fines up to \$250,000, or impriso	
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankruptcy Petitio  Declaration, and Signatur	
that they ar	alty of perjury, I declare te true and correct. In C. Yasch	that I have read the sum	mary and schedules filed v		
	C. Yasch		Toni K. Yaso		
OUIIII (	J. 143011		i viii iti last	/ii	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Signature of Debtor 2

Date November 13, 2017

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Signature of Debtor 1

Date November 13, 2017

EII	in this infor	mation to identify you	r case:			
	btor 1	John C. Yasch	case.			
De	DIOI I	First Name	Middle Name	Last Name		
De	btor 2	Toni K. Yasch				
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	inkruptcy Court for the:	NORTHERN DISTRICT (	OF OHIO		
1	se number _ nown)				_	heck if this is an nended filing
St	as complete	of Financial		are filing together, both are	ankruptcy equally responsible for suppy y additional pages, write you	
		n). Answer every que		ting form. On the top of an	y additional pages, write you	Thank and case
Pa	rt 1: Give I	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married Not ma	•				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	<i>ı</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
<b>3.</b> stat					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	t 2 Expla	in the Sources of You	r Income			
4.	Fill in the tot	al amount of income yo	nployment or from operatir u received from all jobs and a have income that you receiv	all businesses, including part		dar years?
	□ No ■ Yes. Fil	ll in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$34,090.13	■ Wages, commissions, bonuses, tips	\$62,836.60
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

				Debtor 1					Debtor 2		
				Sources of Check all t		(befo	ss income ore deductions ar usions)	nd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen inuary 1 to	dar year: December	31, 2016 )	■ Wages, bonuses, to	es, commissions, s, tips \$34,082.32			■ Wages, combonuses, tips	nmissions,	\$53,464.17	
				☐ Operati	ng a business				☐ Operating a	business	
		dar year be December		■ Wages, bonuses, ti	commissions,		\$32,063.		■ Wages, combonuses, tips	nmissions,	\$83,021.78
				☐ Operati	ng a business				☐ Operating a	business	
5.	Include include and other winnings.  List each s	come regard public benef If you are fili	less of wheth it payments; ng a joint cas he gross inco	ner that incompensions; reseand you ha		amples or est; divi	of other income and dends; money controlled together, list	are alin ollecte st it onl	d from lawsuits; y once under D	royalties; and ebtor 1.	curity, unemployment, gambling and lottery
				Debtor 1					Debtor 2		
				Sources of Describe be		each (befo	ss income from a source ore deductions ar usions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	yments You	Made Befor	e You Filed for	Bankru	ptcy				
Are either Debtor 1's or Debtor 2's debts p  No. Neither Debtor 1 nor Debtor 2 h individual primarily for a personal,  During the 90 days before you file  No. Go to line 7.  Yes List below each credit paid that creditor. Do not include payments  * Subject to adjustment on 4/01/1  Yes. Debtor 1 or Debtor 2 or both ha During the 90 days before you file				personal, fa personal, fa personal, fa personal, fa personal, fa peach creditor peditor. Do no payments to ton 4/01/19 per both have pre you filed fa	primarily consumily, or househo or bankruptcy, di to whom you pai t include paymer an attorney for the and every 3 year primarily consumity.	umer de d you pa d you pa d a total ats for d his bank s after th umer de id you pa	ay any creditor a  I of \$6,425* or momestic support ruptcy case. hat for cases filed bts. ay any creditor a	total one in coolingated on or	f \$6,425* or moone or more partions, such as classifier the date of \$600 or more?	re? yments and th nild support ar of adjustment.	e total amount you nd alimony. Also, do
		■ Yes	include pay		mestic support o tcy case.	bligatior				Álso, do not ir	clude payments to an
	Creditor'	s Name and	l Address		Dates of payme	ent	Total amoun paid		Amount you still owe	Was this p	ayment for
	PNC Mo P.O. Bo Dayton,				\$675.00 per m	onth	\$2,025.00	0	\$84,117.00	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard payment s or vendors

Statement of Financial Affairs for Individuals Filing for Bankruptcy

7. Within 1 year before you filed for bankruptcy, did you make a payment of				
Insiders include your relatives; any general partners; relatives of any general of which you are an officer, director, person in control, or owner of 20% or more a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payme alimony.	I partners; partnerships of ore of their voting securitie	which you are a geners; and any managing	ral partner; corporations agent, including one fo	
<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>				
	Fotal amount Amou	nt you Reason fo	r this payment	
<ol> <li>Within 1 year before you filed for bankruptcy, did you make any paymer insider?</li> <li>Include payments on debts guaranteed or cosigned by an insider.</li> </ol>	nts or transfer any prope	rty on account of a c	debt that benefited an	
<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>				
Insider's Name and Address Dates of payment T	Fotal amount Amour		r this payment ditor's name	
Part 4: Identify Legal Actions, Repossessions, and Foreclosures	paid 3ti	in owe	unoi 3 name	
<ul> <li>9. Within 1 year before you filed for bankruptcy, were you a party in any la List all such matters, including personal injury cases, small claims actions, dimodifications, and contract disputes.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>				
Case title Nature of the case Co	e case Court or agency		he case	
Regional Acceptance Corp vs Toni Complaint for C Yasch & Kerrie Williams Money C 17CJ813542	Cuyahoga County Cler Court 200 Ontario Street Cleveland, OH 44113	☐ On app	☐ Pending ☐ On appeal ☐ Concluded	
vs. TONI K YASCH ET AL P GR-17-010449 12	Cuyahoga County Com Pleas 200 Ontario Street Cleveland, OH 44113	Pending On app Conclud	eal	
<ol> <li>Within 1 year before you filed for bankruptcy, was any of your property Check all that apply and fill in the details below.</li> </ol>	repossessed, foreclosed	d, garnished, attache	ed, seized, or levied?	
<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>				
Creditor Name and Address Describe the Property		Date	Value of the property	
Explain what happened				
Regional Acceptance Corp P.O. Box 830913 Birmingham, AL 35283  □ Property was repossesse □ Property was garnished.	ed.	9/11/2017 to present	\$2,334.33	
☐ Property was attached, se	eized or levied.			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 John C. Yasch  Toni K. Yasch		Case number (	(if known)	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment become No		did any creditor, including a bank or financial ins you owed a debt?	titution, set off any a	amounts from your
	☐ Yes. Fill in the details.				
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		vas any of your property in the possession of an a er official?	ssignee for the ben	efit of creditors, a
Pa	rt 5: List Certain Gifts and Contributions				
13.	■ No □ Yes. Fill in the details for each gift.	otcy,	did you give any gifts with a total value of more th		
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:		Describe the gifts	Dates you gave the gifts	Value
14.		•	did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al	Describe what you contributed	Dates you contributed	Value
De	*A C. List Cortain Lagge				
15.	Within 1 year before you filed for bankrupt or gambling?  No	cy or	r since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	Yes. Fill in the details.				
	how the loss occurred	nclude	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	Gambling Loss at Jack Casino				
	Gambling Loss at Jack Casino			2017	Unknown
Pai	rt 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pro	epari	id you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		erty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	и	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

	btor 1 John C. Yasch		C	Case number	(if known)	
D01	TOTI N. Tascii			ase mamber	(II KIIOWII)	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	Balena Law Firm, LLC 30400 Detroit Road Suite 106 Westlake, OH 44145 John's parents	Attorney Fees			10/2017	\$1,500.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you not have a long to	ors or to make payment			or transfer any prope	rty to anyone who
10	Person Who Was Paid Address	Description and transferred	value of any prope	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b include both outright transfers and transfers mainclude gifts and transfers that you have alread No  Yes. Fill in the details.	ousiness or financial aff ade as security (such as	airs? the granting of a se			
	Person Who Received Transfer Address	Description and property transfer			s received or debts	Date transfer was made
19.	Person's relationship to you  Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pre ■ No □ Yes. Fill in the details.		ny property to a se	elf-settled tr	ust or similar device	of which you are a
	Name of trust	Description and	value of the prope	erty transfer	red	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, In:	struments, Safe Depos	it Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, asso □ No	or other financial accou	ınts; certificates o	f deposit; s		, ,
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	cle me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
	PNC Bank 2730 Liberty Avenue Pittsburgh, PA 15222	xxxx-9495	■ Checking □ Savings □ Money Marke	ba	2017 with zero alance	\$0.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Money Market☐ Brokerage☐ Other\_\_\_

Debtor 1 John C. Yasch
Debtor 2 Toni K. Yasch

Case number (if known)

	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	No						
	Yes. Fill in the details.						
_	ame of Financial Institution ddress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
2. <b>Ha</b>	ve you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy	?			
	No						
	Yes. Fill in the details.						
	ame of Storage Facility ddress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
	you hold or control any property that some		ty you borrowed from, are storing for	r, or hold in trust			
for	No Yes. Fill in the details.						
_	wner's Name ddress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
or the	Give Details About Environmental Inform purpose of Part 10, the following definitions	apply:					
to	<i>vironmental law</i> means any federal, state, or cic substances, wastes, or material into the a gulations controlling the cleanup of these su	ir, land, soil, surface water, ground	<del>-</del> -				
	e means any location, facility, or property as own, operate, or utilize it, including disposal	_	aw, whether you now own, operate, o	or utilize it or used			
	zardous material means anything an environ zardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,			
Report	all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.				
24. Ha	s any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ental law?			
	No Yes. Fill in the details.						
	ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25. Ha	ave you notified any governmental unit of any release of hazardous material?						
■	No Yes. Fill in the details.						
_	ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.    No		btor 2 John C. Yasch Toni K. Yasch		Case number (if known)	
Case Title Case Number	26.	Have you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlemen	its and orders.
Case Number    Name		_			
Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name Address (Number, Street, City, State and 2IP Code)   Name of accountant or bookkeeper   Describe the nature of the business Name of accountant or bookkeeper   Name of accountant or bookkeeper   Do not include Social Security number or ITIN. Dates business existed    No			Name Address (Number, Street, City,	Nature of the case	
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name Address (Number, Street, City, State and 2IP Code)   Describe the nature of the business (Number, Street, City, State and 2IP Code)   Date subsiness existed	Par	rt 11: Give Details About Your Business or	Connections to Any Business		
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12.  □ Yes. Check all that apply above and fill in the details below for each business.  □ Business Name Address (Number, Street, City, State and ZIP Code) □ Describe the nature of the business Name of accountant or bookkeeper □ Do not include Social Security number or ITIN.  □ Dates business existed  ■ No □ Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code) □ Date Issued □ Address (Number, Street, City, State and ZIP Code) □ Part 12: □ Sign Below □ No □ Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code) □ No □ Address (Number, Street, City, State and ZIP Code) □ No □ Address (Number, Street, City, State and ZIP Code) □ No	27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to	any business?
A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.     Yes. Check all that apply above and fill in the details below for each business.     Business Name		☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time	
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  Address (Number, Street, City, State and ZIP Code)  Date Issued  Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Date Issued  Address (Number, Street, City, State and ZIP Code)  Part 23: Sign Below    Date Issued I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  B U.S.C. §§ 152, 1341, 1519, and 3571.    Issued Indicated I		☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	ip (LLP)	
An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name		☐ A partner in a partnership			
No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  No Dates business existed  No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Name of accountant or bookkeeper  Date Issued  Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  November 13, 2017  Date November 14 Date November 15 Date November 15 Date November 16 Date November 17 Date November 17 Date November 18 Date November 19 Date		☐ An officer, director, or managing e	xecutive of a corporation		
Yes. Check all that apply above and fill in the details below for each business.   Business Name Address (Number, Street, City, State and ZIP Code)   Describe the nature of the business Name of accountant or bookkeeper   Do not include Social Security number or ITIN.   Dates business existed		☐ An owner of at least 5% of the voti	ng or equity securities of a corporation		
Business Name Address (Number, Street, City, State and ZIP Code)  Describe the nature of the business Name of accountant or bookkeeper  Employer Identification number Do not include Social Security number or ITIN.  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No Yes, Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Date Issued  Date Issued  Date Issued  Date Issued  Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §\$ 152, 1341, 1519, and 3571.  Sy John C. Yasch John C. Yas		No. None of the above applies. Go to	Part 12.		
Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Do not include Social Security number or ITIN. Dates business existed  No  No  Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Is U.S.C. §§ 152, 1341, 1519, and 3571.  Is/S John C. Yasch John C. Yasch Signature of Debtor 1  Date November 13, 2017		☐ Yes. Check all that apply above and fi	II in the details below for each business	i.	
Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  18 John C. Yasch John C. Yasch Signature of Debtor 1  Date November 13, 2017  Date November 14, 2017  Date November 15, 2017  Date November 15, 2017  Date November 16, 2017  Date November 17, 2017  Date November 17, 2017  Date November 18, 2017  Date November 19, 2018  Date November 19, 2017  Date November 19, 2018  Date November 19, 2018  Date November 19, 2018  Date Novemb			Describe the nature of the business		
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  1/s/ John C. Yasch John C. Yasch Signature of Debtor 1  Date November 13, 2017			Name of accountant or bookkeeper		ity number or ITIN.
Address (Number, Street, City, State and ZIP Code)  Part 12: Sign Below  have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Is U.S.C. §§ 152, 1341, 1519, and 3571.  Is/ John C. Yasch  John C. Yasch  John C. Yasch  Signature of Debtor 1  Date November 13, 2017	28.	institutions, creditors, or other parties.	otcy, did you give a financial statement t	o anyone about your business? I	nclude all financial
Part 12: Sign Below  have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Is U.S.C. §§ 152, 1341, 1519, and 3571.  Is/ John C. Yasch  John C. Yasch  Signature of Debtor 1  Date  November 13, 2017			Date Issued		
have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  Is U.S.C. §§ 152, 1341, 1519, and 3571.  Is/S John C. Yasch  John C. Yasch  Signature of Debtor 1  Date  November 13, 2017  Date November 13, 2017  Date November 13, 2017  Date November 13, 2017  Date November 13, 2017  Date November 13, 2017  No  Yes  No  No					
are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.    S   John C. Yasch	Par	rt 12: Sign Below			
John C. Yasch Signature of Debtor 1  Date November 13, 2017  Date November 13, 2017  Date November 13, 2017  Date November 13, 2017  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No  Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	are t with	true and correct. I understand that making a h a bankruptcy case can result in fines up to	a false statement, concealing property,	or obtaining money or property by	
Signature of Debtor 1  Date November 13, 2017					
Date November 13, 2017					
Did you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No	Dat	te November 13, 2017	Date November 13, 201	7	
■ No	Did :	you attach additional pages to Your Statem			n 107)?
			ot an attorney to help you fill out bankru	ptcy forms?	
			uptcy Petition Preparer's Notice, Declaration	on, and Signature (Official Form 119	).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this inform	nation to identify your case:
Debtor 1	John C. Yasch
Debtor 2 (Spouse, if filing)	Toni K. Yasch
United States B	Bankruptcy Court for the: Northern District of Ohio
Case number	

Chec	k as directed in lines 17 and 21:
	cording to the calculations required by this atement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 5,684.25 3,070.41 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, **Debtor 1** profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

				Column A Debtor 1		Column B Debtor 2 o	or	
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend the the Social Security Act. Instead, list it here		fit under					
	For you	\$ <b>0.</b>	00					
	For your spouse		00					
9.	<b>Pension or retirement income.</b> Do not in benefit under the Social Security Act.	nclude any amount received that wa	sa	\$	0.00	\$	0.00	
10.	Income from all other sources not listed Do not include any benefits received under received as a victim of a war crime, a crim domestic terrorism. If necessary, list other total below.	er the Social Security Act or paymer ne against humanity, or international	nts or					
				\$	0.00	\$	0.00	
				\$	0.00	. \$	0.00	
	Total amounts from separate pag	ges, if any.	+	\$	0.00	. \$	0.00	
11.	Calculate your total average monthly in each column. Then add the total for Column		\$	3,070.41	+ \$_	5,684.25	= \$_	8,754.66
								tal average
Part	Determine How to Measure Your	Deductions from Income						many moonic
40	Communicated annual month hadron	an from line 44					ф.	0.754.00
12.	. Copy your total average monthly incom . Calculate the marital adjustment. Check	k one:					\$	8,754.66
10.	☐ You are not married. Fill in 0 below.	Cono.						
	You are married and your spouse is t	filing with you. Fill in 0 below						
	☐ You are married and your spouse is i	• ,						
	Fill in the amount of the income listed dependents, such as payment of the	d in line 11, Column B, that was NO						
	Below, specify the basis for excluding adjustments on a separate page.	g this income and the amount of inc	ome dev	voted to eac	h purpos	e. If necessary	y, list addi	tional
	If this adjustment does not apply, ent	er 0 below.						
			\$		_			
	9		\$					
			+\$					
	Total		\$	0.0	<u>0</u> c	opy here=>		0.00
14.	Your current monthly income. Subtract	ct line 13 from line 12.					\$	8,754.66
15.	. Calculate your current monthly incom	e for the year. Follow these steps:						
	15a. Copy line 14 here=>						\$	8,754.66
	Multiply line 15a by 12 (the numbe	er of months in a year).					X	12
	15b. The result is your current monthly	income for the year for this part of t	he form.					05,055.92

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 2

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

ebtor 1	John C. Yasch
ebtor 2	Toni K. Yasch

Case number (if known)

16	Calculate the median family income that applies to	you. Follow these	steps:		
	16a. Fill in the state in which you live.	ОН			
	16b. Fill in the number of people in your household.	4			
	16c. Fill in the median family income for your state and	size of household		\$	83,515.00
	To find a list of applicable median income amount instructions for this form. This list may also be available.				
17	How do the lines compare?	anable at the barne	uptoy cicino cinoc.		
	17a.		e 1 of this form, check box 1, <i>Disposable incation of Your Disposable Income</i> (Official F		
		ulation of Your D	orm, check box 2, <i>Disposable income is de</i> isposable Income (Official Form 122C-2)		
Par	3: Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)	(4)		
18.	Copy your total average monthly income from line	11		\$	8,754.66
19.	<b>Deduct the marital adjustment if it applies.</b> If you are contend that calculating the commitment period under spouse's income, copy the amount from line 13.	11 U.S.C. § 1325(			0.00
	19a. If the marital adjustment does not apply, fill in 0 or	n line 19a.		<b>-</b> \$	0.00
	19b. Subtract line 19a from line 18.			\$_	8,754.66
20.	Calculate your current monthly income for the year	r. Follow these ste	eps:		
	20a. Copy line 19b		•	\$	8,754.66
	Multiply by 12 (the number of months in a year).				<b>x</b> 12
	20b. The result is your current monthly income for the	year for this part o	f the form	\$	105,055.92
	20c. Copy the median family income for your state and	size of household	from line 16c	\$	83,515.00
	21. How do the lines compare?				
	Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	vise ordered by the	court, on the top of page 1 of this form, ch	eck box 3,	The commitment
	Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise or	dered by the court, on the top of page 1 of	this form,	check box 4, The
Par	4: Sign Below				
	By signing here, under penalty of perjury I declare that	the information or	this statement and in any attachments is to	rue and co	rrect.
)	/ /s/ John C. Yasch		X /s/ Toni K. Yasch		
•	John C. Yasch		Toni K. Yasch		
	Signature of Debtor 1		Signature of Debtor 2		
	Date November 13, 2017  MM / DD / YYYYY		Date November 13, 2017 MM / DD / YYYY		
	If you checked 17a, do NOT fill out or file Form 122C-2	2.			
	If you checked 17b, fill out Form 122C-2 and file it with	this form. On line	39 of that form, copy your current monthly i	ncome fro	m line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Fill in this ir	nformation to identify your case:			
Debtor 1	John C. Yasch			
Debtor 2 (Spouse, if fil	Toni K. Yasch			
United States	s Bankruptcy Court for the: Northern District of Ohio			
Case numbe (if known)	r	☐ Check	if this is an amended	d filing
Official Form	<u>1122C-2</u> r 13 Calculation of Your Disposable Ir	ncome		04/1
space is nee additional pa	ete and accurate as possible. If two married people are filing toge ded, attach a separate sheet to this form, Include the line number ages, write your name and case number (if known).  Calculate Your Deductions from Your Income	ther, both are equally respo to which additional informa	ensible for being accur ation applies. On the to	ate. If more
the quest	nal Revenue Service (IRS) issues National and Local Standards fo ions in lines 6-15. To find the IRS standards, go online using the I on may also be available at the bankruptcy clerk's office.			
expenses	e expense amounts set out in lines 6-15 regardless of your actual experif they are higher than the standards. Do not include any operating expand do not deduct any amounts that you subtracted from your spouse's	enses that you subtracted fro	m income in lines 5 and	
If your exp	penses differ from month to month, enter the average expense.			
Note: Line	numbers 1-4 are not used in this form. These numbers apply to inform	nation required by a similar for	rm used in chapter 7 ca	ses.
5. <b>The</b> i	number of people used in determining your deductions from inco	me		
plus t	the number of people who could be claimed as exemptions on your fe the number of any additional dependents whom you support. This num umber of people in your household.		4	

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

 Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,650.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

page 1

9b. 9c.	To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor  PNC Mortgage  9b. Total average monthly payment Net mortgage or rent expense.  Subtract line 9b (total average monthly payment) or rent expense). If this number is less than \$0, expense is less than \$0.	Average payment  \$ ent \$  from line 9a (money)	666.00	Copy here=>	\$	666.00 Copy here=>	Repeat this amour on line 33a.
	contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor  PNC Mortgage  9b. Total average monthly payments	Average payment	monthly 666.00		\$	666.00	
9b.	contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor	Average payment	monthly				
9b.	contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor	Average payment	monthly				
9b.	contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	60 months after y	ou file	ı			
9b.							
	. Total average monthly payment for all mortgages		•	your home.			
9a.	Using the number of people you entered in line 5, listed for your county for mortgage or rent expens		mount		\$1	181.00	
	using and utilities - Mortgage or rent expenses:	3 -				_	
. Ho	e instructions for this form. This chart may also using and utilities - Insurance and operating expense dollar amount listed for your county for insurance	enses: Using the	e number of			5, fill \$	630.0
	sing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Trust	ee Program cha	rt. To find t	he chart, go or	iline using	the link s	pecified in the
_	sing and utilities - Insurance and operating expe	nses					
	on information from the IRS, the U.S. Trustee Proptcy purposes into two parts:	ogram has divide	ed the IRS	Local Standard	for housi	ng for	
	tandards You must use the IRS Local Standards					_	
7g.	Total. Add line 7c and line 7f		\$	196.00	Copy t	otal here=>	\$ 196.00
7f.	Subtotal. Multiply line 7d by line 7e.	\$0	.00	Copy here=>	\$	0.00	
7e.	Number of people who are 65 or older	x 0					
7d.	Out-of-pocket health care allowance per person	\$ 1	17				
eople v	who are 65 years of age or older						
	Subtotal. Multiply line 7a by line 7b.	\$196	.00	Copy here=>	\$	196.00	
7c.	Number of people who are under 65	X 4					
	Out-of-pocket health care allowance per person	\$	49				

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

page 2

Debtor 1	John C. Yasch
Debtor 2	Toni K. Yasch

Case number (if known)

11.	Local transportation expenses: Check the number of vehicle	les for which you claim	an ownership or operating	expense.	
	□ 0. Go to line 14.				
	☐ 1. Go to line 12.				
	2 or more. Go to line 12.				
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for y				0
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local S You may not claim the expense if you do not make any loan of more than two vehicles.				
Ve	hicle 1 Describe Vehicle 1: 2010 Chevy Equinox 10	7,047 miles Fair Co	ondition: FMV: KBB		
13a.	Ownership or leasing costs using IRS Local Standard		. \$ 485.00		
13b.	Average monthly payment for all debts secured by Vehicle 1.				
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.		at		
	Name of each creditor for Vehicle 1	Average monthly payment			
	GM Financial	\$ 425.07			
	Total Average Monthly Payment	\$	Copy here => -\$ 425	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense			Copy net Vehicle 1	
	Subtract line 13b from line 13a. if this number is less than \$0,	enter \$0	\$59.93	expense here => \$ 59.93	3_
Ve	hicle 2 Describe Vehicle 2: 2011 Chevy Malibu				
13d	Ownership or leasing costs using IRS Local Standard		. \$		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles. $ \\$	Do not include costs fo	or		
	Name of each creditor for Vehicle 2	Average monthly payment			
	-NONE-	\$			
	Total average monthly payment	\$0.00	Copy here => -\$ 0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0,	enter \$0	\$ <b>0.00</b> _	Vehicle 2 expense here => \$ 0.00	0
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of we			the \$ 0.00	0_
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in who not claim more than the IRS Local Standard for <i>Public Transportation</i>	nat you believe is the a			D

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

page 3

Othe						
		addition to the expense deduce following IRS categories.	ctions listed above	, you are allowed your monthly expenses	for	
	self-employment taxes, social syour pay for these taxes. Howe and subtract that number from	security taxes, and Medicare to ever, if you expect to receive a the total monthly amount that	taxes. You may inc a tax refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	•	4 000 00
	Do not include real estate, sale	es, or use taxes.			\$	1,909.00
	<b>Involuntary deductions:</b> The contributions, union dues, and		ons that your job re	quires, such as retirement		
	Do not include amounts that ar	e not required by your job, su	ich as voluntary 40	1(k) contributions or payroll savings.	\$	0.00
	filing together, include paymen	ts that you make for your spo e insurance on your depende	use's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
	Court-ordered payments: The administrative agency, such as			by the order of a court or		
				You will list these obligations in line 35.	\$	0.00
20.	<b>Education:</b> The total monthly a as a condition for your job, o		ation that is either	required:		
	_				¢	0.00
21				ation is available for similar services. sitting, daycare, nursery, and preschool.	\$	0.00
	Do not include payments for ar			sitting, daycare, nursery, and prescribor.	\$	0.00
		nd welfare of you or your dep	endents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Payments for health insurance	or health savings accounts s	hould be listed only	y in line 25.	\$	27.00
	for you and your dependents, s phone service, to the extent ne income, if it is not reimbursed by	such as pagers, call waiting, c ecessary for your health and w by your employer. asic home telephone, internet	caller identification, velfare or that of your and cell phone se	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	200.00
	Add all of the expenses allow					
		ved under the IRS expense	allowances.		\$	5,592.93
	Add lines 6 through 23.	These are additional deduc	ctions allowed by tl		\$	5,592.93
Addi	Add lines 6 through 23.	These are additional deduc Note: Do not include any ex	ctions allowed by the xpense allowances	s listed in lines 6-24.	\$	5,592.93
Addi 25.	Add lines 6 through 23. itional Expense Deductions  Health insurance, disability i	These are additional deduc Note: Do not include any ex	ctions allowed by the common state of the comm			5,592.93
Addi 25.	Add lines 6 through 23. itional Expense Deductions  Health insurance, disability i insurance, disability insurance,	These are additional deduc Note: Do not include any ex	ctions allowed by the contract of the contract	s listed in lines 6-24.  uses. The monthly expenses for health		5,592.93
Addi 25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.	These are additional deduction Note: Do not include any experience, and health saving, and health savings accounts	ctions allowed by the contract of the contract	s listed in lines 6-24.  uses. The monthly expenses for health		5,592.93
<b>Addi</b> 25.	Add lines 6 through 23. itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance	These are additional deduct Note: Do not include any experience, and health saving and health savings accounts	ctions allowed by the common street allowances allowances that are reasonable 225.33	s listed in lines 6-24.  uses. The monthly expenses for health		5,592.93
<b>Addi</b> 25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance	These are additional deduction Note: Do not include any expenses and health saving and health savings accounts  \$ _ \$ _ \$ _	ctions allowed by the common street of the common s	s listed in lines 6-24.  uses. The monthly expenses for health		441.33
<b>Addi</b> 25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account	These are additional deduce Note: Do not include any expression of the saving and health saving and health savings accounts  \$	ctions allowed by the expense allowances are that are reasonable 225.33  0.00  216.00	s listed in lines 6-24.  ISES. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
<b>Addi</b> 25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total	These are additional deduce Note: Do not include any expression of the saving and health saving accounts  \$	ctions allowed by the expense allowances are that are reasonable 225.33  0.00  216.00	s listed in lines 6-24.  ISES. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
<b>Addi</b> 25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this tota	These are additional deduce Note: Do not include any expression of the saving and health saving accounts  \$	ctions allowed by the expense allowances of that are reasonable 225.33 0.00 216.00 441.33	s listed in lines 6-24.  ISES. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
Addi 25.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total  No. How much do you yes  Yes  Continued contributions to to continue to pay for the reasona your household or member of yes.	These are additional deduct Note: Do not include any expenses and health saving and health savings accounts  \$	ctions allowed by the expense allowances allowances are that are reasonabed as a count expense that are reasonabed as a count expense and a count expense are that are reasonabed as a count expense and a count expense are the expense are t	c actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	r	
Addi 25. 26.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total  No. How much do you was yes  Continued contributions to the continue to pay for the reasonary your household or member of yinclude contributions to an according to the protection against family vio	These are additional deduce Note: Do not include any expenses and health saving and health saving accounts and health savings accounts accounts and health savings accounts and health savings accounts accounts and health savings accounts and health savings accounts accounts and health savings accounts accounts and health savings accounts accounts accounts and health savings accounts accounts accounts accounts accounts accounts account accounts accounts accounts account accounts account accounts accounts account accounts account accounts account accounts account accounts accounts account account accounts account account accounts account account accounts account account account accounts account account account account accounts account acc	ctions allowed by the support of an elder unable to pay for sarry monthly experses.	c actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)  nses that you incur to maintain the	r \$	441.33
25. 26.	Add lines 6 through 23.  Itional Expense Deductions  Health insurance, disability i insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total  No. How much do you was yes  Continued contributions to the continue to pay for the reasonary your household or member of yinclude contributions to an according to the protection against family vio	These are additional deduce Note: Do not include any expenses and health saving and health saving accounts and health savings accounts accounts and health savings accounts and health savings accounts and health savings accounts accounts and health savings accounts and health savings accounts and health savings accounts accounts and health savings accounts accounts and health savings accounts accounts accounts and health savings accounts account accounts accounts accounts accounts accounts accounts accounts accounts account accounts accounts accounts accounts account ac	ctions allowed by the spense allowances allowances allowances are reasonable that are reasonable 225.33  0.00  216.00  441.33  nilly members. The support of an elder unable to pay for same 26 U.S.C. § 5 asary monthly expervention and Service allowances.	c actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	r \$	441.33

Official Form 122C-2

or 1 or 2	Toni K. Yasch	Case numb	er ( <i>if known</i> )				
	additional home energy costs. Your home ne 8.	e energy costs are included in your insurance and	operating e	expense	s on		
	you believe that you have home energy co, then fill in the excess amount of home en	osts that are more than the home energy costs incl ergy costs	uded in ex	penses	on line	Э	
	ou must give your case trustee documenta mount claimed is reasonable and necessal	ation of your actual expenses, and you must show try.	that the ad	ditional		\$_	0
\$	Education expenses for dependent child 160.42* per child) that you pay for your depublic elementary or secondary school.	ren who are younger than 18. The monthly experpendent children who are younger than 18 years of	nses (not n ld to attend	nore tha I a priva	n te or		
	ou must give your case trustee documental laimed is reasonable and necessary and necessary	ation of your actual expenses, and you must explain ot already accounted for in lines 6-23.	n why the a	amount			
*	Subject to adjustment on 4/01/19, and eve	ry 3 years after that for cases begun on or after the	e date of a	djustmei	nt.	\$_	320
h		ne monthly amount by which your actual food and of allowances in the IRS National Standards. That are in the IRS National Standards.					
		onal allowance, go online using the link specified in o be available at the bankruptcy clerk's office.	n the sepai	ate			
Υ	ou must show that the additional amount c	laimed is reasonable and necessary.				\$	57
	Continuing charitable contributions. The natruments to a religious or charitable organ	amount that you will continue to contribute in the formation. 11 U.S.C. § 548(d)(3) and (4).	orm of casl	n or fina	ncial		
П	o not include any amount more than 15%	of your gross monthly income.				\$_	0
32. <b>A</b>	add all of the additional expense deductional lines 25 through 31.	ions.				\$_	819.17
32. <b>A</b> A	dd lines 25 through 31.	ions.				\$	819.17
32. A A Deduc	add lines 25 through 31.		nages veh	icle		\$	819.17
32. A A Deduc 33. Fo	add lines 25 through 31.	n property that you own, including home mortg	gages, veh	icle		\$	819.17
2. A A Deduction 10a To	add lines 25 through 31.  ctions for Debt Payment  or debts that are secured by an interest i ans, and other secured debt, fill in lines	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e				\$	819.17
2. A A Deduction 10a To	add lines 25 through 31.  ctions for Debt Payment  or debts that are secured by an interest i ans, and other secured debt, fill in lines  calculate the total average monthly payment	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e				Avera	ge monthly
2. A A Deduct 3. Fo loa To cre	add lines 25 through 31.  ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly payment editor in the 60 months after you file for bar Mortgages on your home	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.			=>		ge monthly ent
2. A A eeduc 3. Fo loa To cre	ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly payme editor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e			=>	Avera	ge monthly
2. A A Reduction 3. Fo loa To cre 3a.	add lines 25 through 31.  ctions for Debt Payment or debts that are secured by an interest it ans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	ach secure	ed		Avera	ge monthly ent 666.00
2. A A A A A A A A A A A A A A A A A A A	add lines 25 through 31.  ctions for Debt Payment or debts that are secured by an interest it ans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	ach secure	ed	=>	Avera	ge monthly ent 666.00 425.07
2. A A A A A A A A A A A A A A A A A A A	ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly paymed editor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	ach secure	ed		Avera	ge monthly ent 666.00
22. A A A A A A A A A A A A A A A A A A	ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly payme editor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  List other secured debts:	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	ach secure	od .	=>	Avera	ge monthly ent 666.00 425.07
22. A A A A A A A A A A A A A A A A A A	ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly paymed editor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe inclu	ed	=> => ent	Avera	ge monthly ent 666.00 425.07
22. A A A A A A A A A A A A A A A A A A	ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly payme editor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  List other secured debts:	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe inclu	s paymi	=> => ent	Avera	ge monthly ent 666.00 425.07
2. A A Peduc To cres 3a. 3b. 3c. 3d. ame	ctions for Debt Payment or debts that are secured by an interest is ans, and other secured debt, fill in lines a calculate the total average monthly payme editor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  List other secured debts:	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe incluor in	s paymi de taxe surance	=> => ent	Avera	ge monthly ent 666.00 425.07
2. A A Peducian To creation 33. For local To creation 33. Solution 33.	add lines 25 through 31.  Actions for Debt Payment  or debts that are secured by an interest is ans, and other secured debt, fill in lines or calculate the total average monthly payment address in the 60 months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you f	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe incluor in	s paymoude taxessurance	=> => ent	Avera payme \$\$	ge monthly ent 666.00 425.07
22. A A Peducian To creation 33. For local To creation 33. Solution 33	add lines 25 through 31.  Actions for Debt Payment  or debts that are secured by an interest is ans, and other secured debt, fill in lines or calculate the total average monthly payment address in the 60 months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you f	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe incluor in	s payme ude taxe surance No Yes	=> => ent	Avera paymos \$\$	ge monthly ent 666.00 425.07
2. A A Peduc To cres 3a. 3b. 3c. 3d. ame	add lines 25 through 31.  Actions for Debt Payment  or debts that are secured by an interest is ans, and other secured debt, fill in lines or calculate the total average monthly payment address in the 60 months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you f	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe incluor ir	s paymidde taxe asurance No Yes No Yes	=> => ent	Avera payme \$\$	ge monthly ent 666.00 425.07
22. A A Peducian To creation 33. For local To creation 33. Solution 33	add lines 25 through 31.  Actions for Debt Payment  or debts that are secured by an interest is ans, and other secured debt, fill in lines or calculate the total average monthly payment address in the 60 months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you file for bare to the following months after you f	n property that you own, including home morto 33a through 33e. ent, add all amounts that are contractually due to e akruptcy. Then divide by 60.	Doe incluor ir	s paymide taxe asurance No Yes	=> => ent	Avera paymos \$\$	ge monthly ent 666.00 425.07

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

page 5

	debts that you listed in line				∍,					
□ No.	Go to line 35.		•	•						
	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your property								
Name of the	creditor	Identify property that se	cures the deb	ot	To	otal cure amount			nthly ount	cure
GM Finan	cial	2010 Chevy Equino Fair Condition: FM	ox 107,047 //V: KBB	\$		1,401.00		\$_	ount	23.35
				\$ \$	_		$\div 60 = \\ \div 60 = \\$	· _		
				Ť	\$	23.35	Co	py al	¢	23.35
				TOLAI	Φ	20.00	_ hei	e=>	Φ_	20.00
□ No.	due as of the filing date of Go to line 36. Fill in the total amount of a ongoing priority claims, suc	I of these priority claims.	Do not includ							
	Total amount of all past-d	•			\$	6,531.09	÷	60	\$	108.85
36. Proiecte	d monthly Chapter 13 plan				\$	1,287.26	_		* —	
Office of the Exec To find a li	nultiplier for your district as s the United States Courts (fo utive Office for United States ist of district multipliers that inclunstructions for this form. This list	r districts in Alabama and s Trustees (for all other d des your district, go online u	d North Caroli istricts). sing the link sp	ina) or by ecified in the	X	9.70	_			
Average	monthly administrative expe	nse				\$124.86	Copy here=			124.86
	of the deductions for debter 33e through 36.	payment.							\$	1,348.13
Γotal Deduc	tions from Income									
88. Add all c	of the allowed deductions.									
	ne 24, All of the expenses all e allowances	lowed under IRS	\$	5,592.93	3					
Copy lir	ne 32, All of the additional ex			819.17	7_					
Copy lir	ne 37, All of the deductions f	or debt payment	+\$	1,348.13	3					
Total de	eductions		\$	7,760.23	3_	Copy total here=>	•	\$		7,760.23

Case number (if known)

39. <b>Copy</b> v									
		ent monthly income from line Current Monthly Income and C					\$	8,754.	66
<b>childre</b> disabili receive	en. The monthlity payments for ed in accordance	ly necessary income you rece y average of any child support port or a dependent child, reported in the with applicable nonbankrupto anded for such child.	payments, fost Part I of Form	er care payments, or 122C-1, that you	\$		0.00		
employ in 11 U	yer withheld fro	etirement deductions. The more wages as contributions for quality plus all required repayments § 362(b)(19).	ualified retirem	ent plans, as specified	\$		0.00		
42. Total o	of all deductio	ns allowed under 11 U.S.C. §	707(b)(2)(A).	Copy line 38 here=>	> \$	7,760	0.23		
expens their ex	ses and you ha xpenses. You r	al circumstances. If special ciruve no reasonable alternative, dinust give your case trustee a descumentation for the expenses.	escribe the sp	ecial circumstances and	d				
Describe t	the special cir	cumstances		Amount of expe	nse				
				\$		_			
				\$		_			
				\$		-			
			Total	\$0.00	Co	ppy re=> \$	0.00		
44. Total a	adjustments. /	Add lines 40 through 43.		=> [	\$	7,760.23	Copy here=> -\$	7,760.	23
		Add lines 40 through 43thly disposable income under				<u>,                                    </u>	1 11	7,760. 994.43	
45. <b>Calcul</b>	ate your mon					<u>,                                    </u>	here=> -\$	·	
45. Calculated 45. Chang have claime you file	Change in Inco ge in income of thanged or are bur case will be ed your petition	thly disposable income under	orm 122C-1 or the date you fow. For exampmn, enter line 2	Subtract line 44 from li  the expenses you repoiled your bankruptcy peole, if the wages reported in the second column,	ine 3	9. in this form and during the creased after	here=> -\$ \$	·	
45. Calculated 46. Chang have claime you file	Change in Inco ge in income of thanged or are bur case will be ed your petition	ome or Expenses or expenses. If the income in Forvirtually certain to change after expen, fill in the information below, check 122C-1 in the first colur	orm 122C-1 or the date you fow. For exampmn, enter line 2	Subtract line 44 from li  the expenses you repoiled your bankruptcy peole, if the wages reported in the second column,	orted etitior ed inc	9. in this form and during the creased after	here=> -\$ \$	994.43	
45. Calculate 45. Chang have classes 46. Chan	change in Income of the period	thly disposable income under one or Expenses or expenses. If the income in Formation below, check 122C-1 in the first column when the increase occurred,	orm 122C-1 or the date you fow. For exampmn, enter line 2	Subtract line 44 from li the expenses you repoiled your bankruptcy pe ole, if the wages reporte in the second column, mount of the increase.	orted etitior ed inc	9. in this form and during the creased after lain why the  Increase or decrease?  Increase  Decrease Increase	here=> -\$  \$  Amount of	994.43	
45. Calculate 45. Calculate 46. Chang have of time you file wages  Form  122C-1 122C-1 122C-1 122C-2 122C-1	change in Income of the period	thly disposable income under one or Expenses or expenses. If the income in Formation below, check 122C-1 in the first column when the increase occurred,	orm 122C-1 or the date you fow. For exampmn, enter line 2	Subtract line 44 from li the expenses you repoiled your bankruptcy pe ole, if the wages reporte in the second column, mount of the increase.	orted etitior ed inc	9.  in this form and during the creased after lain why the  Increase Increase Decrease Increase Increase Increase Increase Increase Increase	\$ Amount o	994.43	
45. Calculate 45. Chang have classes 46. Chan	change in Income of the period	thly disposable income under one or Expenses or expenses. If the income in Formation below, check 122C-1 in the first column when the increase occurred,	orm 122C-1 or the date you fow. For exampmn, enter line 2	Subtract line 44 from li the expenses you repoiled your bankruptcy pe ole, if the wages reporte in the second column, mount of the increase.	orted etitior ed inc	9. in this form and during the creased after lain why the  Increase or decrease?  Increase Decrease Increase Decrease Decrease	here=> -\$  \$  Amount of	994.43	

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

page 7

ebtor 1 ebtor 2	John C. Yasch Toni K. Yasch	Case number (if known)			
Part 4:	Sign Below				
E	By signing here, under penalty of perjury you declare that the inform	nation	on this statement and in any attachments is true and correct.		
	/s/ John C. Yasch John C. Yasch Signature of Debtor 1	X	/s/ Toni K. Yasch Toni K. Yasch Signature of Debtor 2		
_	November 13, 2017 MM / DD / YYYY	Date	November 13, 2017 MM / DD / YYYY		

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Debtor 2

Income for the Period **05/01/2017** to **10/31/2017**.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Gooch & Housego Ohio LLC

Income by Month:

111001110 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
6 Months Ago:	05/2017	\$2,923.20
5 Months Ago:	06/2017	\$2,932.34
4 Months Ago:	07/2017	\$3,012.27
3 Months Ago:	08/2017	\$2,153.95
2 Months Ago:	09/2017	\$4,356.47
Last Month:	10/2017	\$3,044.24
	Average per month:	\$3,070.41

Debtor 1	John C. Yasch
Debtor 2	Toni K. Yasch

Case number (if known)

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 05/01/2017 to 10/31/2017.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Humana at Home, Inc

Income by Month:

6 Months Ago:	05/2017	\$5,815.02
5 Months Ago:	06/2017	\$7,118.11
4 Months Ago:	07/2017	\$4,941.19
3 Months Ago:	08/2017	\$4,841.17
2 Months Ago:	09/2017	\$5,695.02
Last Month:	10/2017	\$5,695.00
	Average per month:	\$5,684.25

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## United States Bankruptcy Court Northern District of Ohio

In	re	John C. Yasch Toni K. Yasch	Case No.	
	-	Debtor(s)	Chapter	13
		DISCLOSURE OF COMPENSATION OF ATTORNE	Y FOR DE	EBTOR(S)
1.	con	suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for appensation paid to me within one year before the filing of the petition in bankruptcy, or agrendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	reed to be paid	to me, for services rendered or to
		FLAT FEE		
		For legal services, I have agreed to accept	\$	
		Prior to the filing of this statement I have received	\$	
		Balance Due	\$	
		RETAINER		
		For legal services, I have agreed to accept and received a retainer of	\$	1,500.00
		The undersigned shall bill against the retainer at an hourly rate of [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.	\$	300.00
2.	The	e source of the compensation paid to me was:		
		☐ Debtor ☐ Other (specify): <b>John's parents.</b>		
3.	The	e source of compensation to be paid to me is:		
		■ Debtor □ Other (specify):		
4.		I have not agreed to share the above-disclosed compensation with any other person unless	s they are meml	bers and associates of my law firm.
		I have agreed to share the above-disclosed compensation with a person or persons who ar copy of the agreement, together with a list of the names of the people sharing in the comp		
5.	In	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the	ne bankruptcy c	ease, including:
	b. c.	Analysis of the debtor's financial situation, and rendering advice to the debtor in determining Preparation and filing of any petition, schedules, statement of affairs and plan which may Representation of the debtor at the meeting of creditors and confirmation hearing, and any [Other provisions as needed]	be required;	
6.	Ву	agreement with the debtor(s), the above-disclosed fee does not include the following servi Representation of the debtors in any dischargeability actions, judicial li actions,any adversary proceedings, random audit, conversion to another	ien avoidance	

John	C.	Yasch
Toni	K.	Yasch

In re

Case No.		

Debtor(s)

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete statem this bankruptcy proceeding.	nent of any agreement or arrangement for payment to me for representation of the debtor(s) in
November 13, 2017	/s/ William J. Balena
Date	William J. Balena 0019641
	Signature of Attorney
	Balena Law Firm, LLC
	30400 Detroit Road
	Suite 106
	Westlake, OH 44145
	Name of law firm

## United States Bankruptcy Court Northern District of Ohio

In re	Toni K. Yasch		Case No.	
		Debtor(s)	Chapter 13	
	VERI	FICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtors hereby verify th	nat the attached list of creditors is true and o	correct to the best of their knowledge	
Date:	November 13, 2017	/s/ John C. Yasch		
		John C. Yasch Signature of Debtor		
Date:	November 13, 2017	/s/ Toni K. Yasch		
		Toni K. Yasch		
		Signature of Debtor		

John C. Yasch

Attorney General of The US 950 Pennsylvania Avenue, NW Washington, DC 20530

Blue Green Corp. 4960 Conference Way N #100 Attn: President Boca Raton, FL 33431

Cavalry SPV I, LLC 500 Summit Lake Drive, #400 Valhalla, NY 10595

CBE Group Inc 1309 Technology Pkwy Cedar Falls, IA 50613

Centralized Business Solutions P.O. Box 2714 North Canton, OH 44720

CheckSmart Attn: President 7001 Post Road, Suite 200 Dublin, OH 43016

CheckSmart
Attn: James Frauenberg II, Presiden
7001 Post Road, Suite 200
Dublin, OH 43016

Cleveland Clinic Attn: Tom Mihaljevic, CEO 9500 Euclid Avenue Cleveland, OH 44195

Craig Relman, Esq. 23811 Chagrin Blvd, #160 Beachwood, OH 44122

Credit Bureau of Stark Attn: Alex A. Gonyias, President 6973 Promway Ave NW North Canton, OH 44720 Credit First National Assoc. Attn: Brian Zempel, CEO & President 6275 Eastland Road Brookpark, OH 44142

Cuyahoga County Clerk of Court 1200 Ontario Street Case No: 17CJ813542 Cleveland, OH 44113

Dept of Ed/Navient Attn: A. Wayne Johnson, COO 123 Justison Street, 3rd Fl Wilmington, DE 19801

FFCC 24700 Chagrin Blvd, #205 Beachwood, OH 44122

Firestone Attn: Gary Garfield, CEO 50 Century Blvd. Nashville, TN 37214

GM Financial P.O. Box 181145 Arlington, TX 76096

Great American Finance 20 North Upper Wacker Drive, #2275 Chicago, IL 60606

Internal Revenue Service P.O. Box 7346 Attn: Central Insolvency Group Philadelphia, PA 19101-7346

Internal Revenue Service Insolvency Group 6 1240 East Ninth Street, Room 493 Cleveland, OH 44199

JC Penney's Attn: Marvin Ellison, CEO 6501 Legacy Drive Plano, TX 75024 Kerrie Williams 26134 RAIN TREE BLVD Olmsted Falls, OH 44138

Kohl's Attn: Kevin Mansell, CEO N56 W17000 Ridgewood Drive Menomonee Falls, WI 53051

Office of the US Attorney Attn: Bankruptcy Section 801 West Superior Ave #400 Cleveland, OH 44113-1852

Onemain Financial Attn: Jay Levine, President/CEO 601 N.W. Second Street Evansville, IN 47708-1013

Pennsylvania Higher Education Attn: James Preston, President/CEO 1200 North 7th Street Harrisburg, PA 17102

PNC Bank Attn: William Demchak, CEO 300 Fifth Avenue Pittsburgh, PA 15222

PNC Mortgage P.O. Box 8703 Dayton, OH 45401

Regional Acceptance Corp. Attn: W. R. Stallings Sr President/CEO 1424 East Fire Tower Road Greenville, NC 27858

Robert M. Stern MD 29101 Health Campus Dr # 340, Westlake, OH 44145 Southwest General Hosptial Attn: William Young, President/CEO 18697 Bagley Road Middleburg Heights, OH 44130-3497

Sychrony Bank Attn: Margaret Keane, President/CEO 170 West Election Road, Suite 125 i Draper, UT 84020

Target Attn: Brian Cornell, CEO 1000 Nicollet Mall Minneapolis, MN 55403

Univeristy Hospital Parma Med. Cnt Thomas F. Zenty III, CEO 11100 Euclid Avenue Cleveland, OH 44106

University Case Medical Cnt Thomas F. Zenty III, CEO 11100 Euclid Avenue Cleveland, OH 44106

Value City Furniture Corp Headq. Attn: Jay Schottenstein, Principal 4300 E 5th Avenue Columbus, OH 43219